NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: _O9 491 643_

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	-	Total
	Sm./Lg.				Sm. Entry	Lg. Entry		
Basic Filing Fee	201/101				___	___	.	690
Total Claims >20	203/103	6	-20 = ___	X	___	___	.	___
Independent Claims >3	202/102	2	-3 = ___	X	___	___	.	___
Mult. Dep Claim Present	204/104				___	___		___
Surcharge	205/105				___	___	.	130
English Translation	139							___

TOTAL FEE CALCULATION   820

Fees due upon filing the application:

Total Filing Fees Due = $ ___820___

Less Filing Fees Submitted - $ ___0___

BALANCE DUE   = $ ___820___

_____
Office of Initial Patent Examination

Figure 7

PATENT APPLICATION FEE DETERMINATION RECORD	Application or Docket Number
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999	09491643

CLAIMS AS FILED - PART I

	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	6 minus 20=	*
INDEPENDENT CLAIMS	2 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		

	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
	RATE	FEE	OR	RATE	FEE
BASIC FEE		345.00	OR		690.00
TOTAL CLAIMS	X$ 9=		OR	X$18=	
INDEP.	X39=		OR	X78=	
MULT.	+130=	?	OR	+260=	
	TOTAL		OR	TOTAL	690

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.